PACE 1/25 * RCVD AT 6/30/2006 3:58:28 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/28 * DNIS:2738300 * CSID:919 664 8625 * DURATION (mm-ss):09-16

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| FAX NUMBER: 571-273- 4639- 8300 | TOTAL NO. OF PAGES INCLUDING COVER: | | | | | | |
| PHONE NUMBER: 571-272-4039 | | sender's reference number: atty docket #1401-002 | | | | | |
| RCE for application | YOUR REFERENCE NUMBER: Serial No. 09/943,799 | | | | | | |
| ☑ URGENT ☑ FOR REVIEW | ☐ PLEASE COMMENT | ☐ PLEASE REPLY | ☐ PLEASE RECYCLE | | | | |
| NOTES/COMMENTS: Request for Continued Ex | camination for serial na | o. 09/943,799 | | | | | |

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PTO/SB/21 (09-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application Number 09/943.799 Filing Date RECEIVED TRANSMITTAL 08/31/2001 CENTRAL FAX CENTER First Named Inventor FORM GLASGOW Art Unit 2162 JUN 3 0 2006 Examiner Name Ahn LY (to be used for all correspondence after initial filing) Attorney Docket Number 1401-002 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ~ Drawing(s) Fee Transmittal Form Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC ~ Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer below): **Extension of Time Request** Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Request for Continued Examination w/one month extension of time fees Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Signature Printed name WOÉ Reg. No. Date 06/30/2006 42,585 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with nvelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on sufficient postage as first class mail in an the date shown below: Signature Date 06/30/2006 GI Typed or printed name This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the

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| | | | First Named Inventor | | | JW | | | |
| | | Examiner Name | | | Ahn LY | | | IUN 3 0 210 | |
| Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | | | 2162 | | | | |
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| UBMITTED BY | | Registration No. 42,585 | | | | Telephone 919.664.8222 | | | |
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